



# BUDAPEST TREATY DEPOSIT FORM (BP/1)

American Type Culture Collection

P.O. Box 1549

Manassas, VA 20108

TO DEPOSIT OR TO CONVERT A DEPOSIT TO MEET THE REQUIREMENTS OF THE BUDAPEST TREATY ON THE INTERNATIONAL RECOGNITION OF THE DEPOSIT OF MICROORGANISMS FOR THE PURPOSES OF A PATENT PROCEDURE

ALL QUESTIONS MUST BE COMPLETED IN ENGLISH. PLEASE USE ONE FORM FOR EACH STRAIN DEPOSITED.

1. Name of deposit. Please mark the appropriate box and provide the information requested for the material:

- ☐ Microorganism – the complete scientific name including genus and species plus the source of the material  
☐ Virus – the name, whether plant or animal, and source including geographic location  
☒ Cell line – the species and tissue of origin, geographical source of isolation, and any known associated hazards (HIV, EBV, etc.)  
☐ Genetic material – the name of organism from which vector, clone or library is derived, the source of the DNA insert identified by species (e.g., human, mouse) or scientific name, the name of gene, and the identity of the host organism  
☐ Consortia or mixed culture – the identity of each component of the mixture  
☐ Seeds, embryos, insect eggs, etc. – the common name, the scientific name of the source of the deposit, and geographical source

HYBRIDOMA: FcγRIIA TRANSGENIC MICE WERE IMMUNIZED WITH MAMMALIAN  
EXPRESSED EXTRACELLULAR PORTION OF FcγRIIB. LYMPHOCYTES FROM THE IMMUNIZED  
MICE WERE FUSED WITH H1L1 MYELOMA CELLS TO IMMORTALIZE THEM.

2. Strain designation\* (i.e., number, symbols, etc.) 1F2

\*The strain designation must correspond with the vial labels.

3. Is this an original deposit under the Budapest Treaty? ☒ Yes ☐ No

4. Is this a request for a conversion of a deposit already at the ATCC to meet the requirements of the Budapest Treaty?

☐ Yes ☒ No

If yes, please indicate ATCC designation. \_\_\_\_\_

5. Is this deposit a mixture of microorganisms or cells? ☐ Yes ☒ No

If yes, please describe: \_\_\_\_\_

6. Provide details necessary to cultivate, test for viability and store the deposit. If a mixture, provide description of components and a method to check for presence. If a plasmid, provide name of host and antibiotic resistance.

DULBECCO'S MODIFIED EAGLE MEDIUM SUPPLEMENTED WITH 15% FETAL CALF  
SERUM, 2mM GLUTAMINE AND 5000 iu/ml GENTAMICIN. CELLS HAVE BEEN FROZEN  
(10<sup>6</sup> GMP/IAL) IN FETAL CALF SERUM CONTAINING 10% DMSO AND  
PLACED IN LIQUID NITROGEN.

7. Provide sufficient description so that ATCC may confirm deposit properties (e.g., Gram negative rod).

ADHERENT CELLS

- a. If deposit is a cell culture, is it being cultured in the presence of antibiotics? ☒ Yes ☐ No

If yes, please list the antibiotics: GENTAMICIN (5000 iu/ml)

- b. If deposit is a hybridoma, what is the isotype of the antibody produced?

murine IgG1

8. Safety: Is this strain hazardous to humans? NO Animals? NO Plants? NO

If yes, what is the recommended biosafety level for working with this strain?

(Refer to Biosafety in Microbiological and Biomedical Laboratories, 4th ed, HHS Publication No. (CDC) 89-8395, U.S. Department of Health and Human Services, Centers for Disease Control, Washington, DC: U.S. Government Printing Office, 1999. The entire text is available online at [www.cdc.gov/od/ohrt/biosafety/bml4d/guide4doc.htm](http://www.cdc.gov/od/ohrt/biosafety/bml4d/guide4doc.htm))

## 9. Regulatory Compliance:

- a. Was the material derived from a human? ☐ Yes ☒ No  
If yes, was an IRB-approved consent form (human subjects) obtained? ☐ Yes ☐ No
- b. Was this material obtained from wildlife? ☐ Yes ☒ No  
If yes, please indicate genus and species and whether wild or captive bred. \_\_\_\_\_
- c. Is work performed at your facility with exotic viruses affecting livestock and avian species? ☐ Yes ☒ No
- d. Identify any reagents of animal origin used to cultivate this organism/cell line (serum, growth factors, trypsin, etc.) and manufacturer, if known: FETAL BOVINE SERUM CERTIFIED, ORIGIN: UNITED STATES.  
MYXOMATOSA VIRUS BACTERIOPHAGE AND ENDOTOXIN TESTED (IN VITROGENA CORPORATION).

## 10. Availability:

Prior to issuance of a U.S. Patent, ATCC will only make a culture available as instructed by the depositor or relevant patent office. Samples must be provided to a specific investigator if a pertinent Patent Office under the Budapest Treaty instructs ATCC to do so. The following questions must be answered:

- a. As of date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit to be made available to anyone who requests a culture? If yes, there are no restrictions on distribution. Answering no will ensure the deposit is not available until the patent has issued. ☐ Yes ☒ No
- b. As of the date of deposit or conversion to meet the requirements of the Budapest Treaty, do you wish the deposit to be made available to requesters that satisfy Patent Offices in countries not signatory to the Budapest Treaty? ☐ Yes ☒ No  
If "yes," please state which countries: \_\_\_\_\_

Please note that if you are converting your deposit to meet the requirements of the Budapest Treaty, and your deposit has already been released for distribution due to the issuance of a U.S. Patent, you cannot restrict it from further distribution. After a U.S. Patent issues and we are so notified, ATCC makes the culture available to anyone who requests it, as allowed under U.S. Patent and Trademark Office (USPTO) Rules and Regulations (37 CFR 1.808 [a][2]).

## 11. Notification: ATCC will notify you of your ATCC number after viability of the deposit has been confirmed.

Name of individual to notify: Joseph E. Panigot

Fax: 301-251-5321 Phone: 301-354-6686 E-mail: panigotj@macrogenics.com

## 12. Payment by check or credit card (MasterCard, VISA or American Express) must accompany the deposit unless prior arrangements for billing have been made and approved. ATCC accepts purchase orders for the exact amount.

Purchase Order No. \_\_\_\_\_ Check No. \_\_\_\_\_

Credit Card number. \_\_\_\_\_ ☐ MasterCard ☐ VISA ☐ American Express

Exp. Date: \_\_\_\_\_ Name shown on card: \_\_\_\_\_  
(Please print clearly or type)

Signature of card holder: \_\_\_\_\_

## PAYMENT: ATCC MUST HAVE A BILLING ADDRESS, CONTACT PERSON, PHONE AND FAX FOR ALL DEPOSITS:

Contact Name: Marilyn Maracic

Billing Address: Jones Day, 222 E. 46th Street

New York, NY 10017-6702

Phone: (212) 790-6417 Fax: (212) 869-9741

Do you have a current ATCC account number? ☒ Yes ☐ No

If Yes: ATCC Account Number = 178147

If No: To apply for an account with ATCC, please complete a New Account Application located on our Web site ([www.atcc.org](http://www.atcc.org)) and return it with supporting documentation to ATCC for approval.

13. Name, address, phone and fax number of your Attorney of Record.

Geraldine E. Baldwin, Esq.  
Jones Day, 222 E. 41st Street  
New York, NY 10017-6702 (Ref: Docket or Case No. 11183-013-999)

14. **MUST BE COMPLETED.** Deposited on behalf of: (Verify with your management who owns the deposit. The owner is usually a company or institution, and not an individual.)

MacroGenics, Inc.

I understand and agree that the deposit may not be withdrawn by me for the period specified in Rule 9.1 of the Budapest Treaty (at least 30 years after the date of deposit or 5 years after the date of the most recent request for the deposit, whichever is longer), and that if a culture should die or be destroyed during the life of the patent, or the period of time so specified, it is my responsibility to replace it with a living culture of the same organism or cell. In the cases of viruses, cell cultures, plasmids, embryos, and seeds, it is my responsibility to supply a sufficient quantity for distribution for the period of time specified above.

Joseph E. Paight  
Printed Name

Joseph E. Paight  
Signature

5/1/64  
Date

Address: MacroGenics, Inc., 1500 East Gude Drive, Rockville, MD 20850

Phone: (301) 354-0686

Fax: (301) 251-5321

E-mail: paight@macrogeni.com

#### SHIPPING INFORMATION

BEFORE SHIPPING, PLEASE CONTACT THE ATCC PATENT DEPOSITORY FOR SHIPMENT ADVICE:

Fax: (703) 365-2745

E-mail: PatentDeposit@atcc.org

#### SHIPPING NOTICE:

The depositor is ultimately responsible for the shipment of deposits to ATCC and compliance with all applicable government regulations for the packaging and movement of the material. The depositor shall indemnify ATCC, to the extent permitted by law, against claims resulting from the violation of applicable government regulations caused by the depositor's shipment of deposits to ATCC.

#### STORAGE & FEES

Storage: Cultures are stored for 30 years from date of deposit or five years after the last request for a sample, whichever is longer, as required under the rules of patent offices in most countries.

Fees: All fees are subject to change. For current fees and other information, check our Web site at [www.atcc.org](http://www.atcc.org) or request a quotation of fees by e-mail at [PatentDeposit@atcc.org](mailto:PatentDeposit@atcc.org) or fax: (703) 365-2745.

ATCC USE ONLY: ATCC DESIGNATION \_\_\_\_\_ REC'D \_\_\_\_\_ V.T. RESULT \_\_\_\_\_

ATCC® is a registered trademark of the American Type Culture Collection.

Form No. PTF001.00, effective 4/8/03

Page 3 of 3